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| <p>Effective on 12/08/2004.<br/>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4819).</p> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2009</h3> |      | <p><b>Complete if Known</b></p> <p>Application Number: 10/562,639-Conf. #8755</p> <p>Filing Date: May 16, 2006</p> <p>First Named Inventor: Peter TUNGUY-DESMARIS</p> <p>Examiner Name: L. E. Karpinski</p> <p>Art Unit: 1616</p> <p>Attorney Docket No.: 5288-0102PUS1</p> |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |      |   |  |
| TOTAL AMOUNT OF PAYMENT   | (\$) | 940.00  |  |

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| <p><b>METHOD OF PAYMENT</b> (check all that apply)</p> <p> <input type="checkbox"/> Check            <input type="checkbox"/> Credit Card            <input type="checkbox"/> Money Order            <input type="checkbox"/> None            <input type="checkbox"/> Other (please identify): _____       </p> <p> <input checked="" type="checkbox"/> Deposit Account            Deposit Account Number: 02-2448            Deposit Account Name: Birch, Stewart, Kolasch &amp; Birch, LLP       </p> <p>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</p> <p> <input checked="" type="checkbox"/> Charge fee(s) indicated below            <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee       </p> <p> <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17            <input checked="" type="checkbox"/> Credit any overpayments       </p> |  |
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| FEE CALCULATION   |              |  |               |                       |                           |                       |                |
|---|--------------|--|---------------|-----------------------|---------------------------|-----------------------|----------------|
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES   |              |  |               |                       |                           |                       |                |
| Application Type  | FILING FEES  |  | SEARCH FEES   |                       | EXAMINATION FEES          |                       | Fees Paid (\$) |
|   | Fee (\$)     | Small Entity Fee (\$)                            | Fee (\$)      | Small Entity Fee (\$) | Fee (\$)                  | Small Entity Fee (\$) |                |
| Utility   | 330          | 165  | 540           | 270                   | 220                       | 110                   |                |
| Design  | 220          | 110  | 100           | 50                    | 140                       | 70                    |                |
| Plant   | 220          | 110  | 330           | 165                   | 170                       | 85                    |                |
| Reissue   | 330          | 165  | 540           | 270                   | 650                       | 325                   |                |
| Provisional   | 220          | 110  | 0             | 0                     | 0                         | 0                     |                |
| 2. EXCESS CLAIM FEES  |              |  |               |                       |                           |                       | Small Entity   |
| Fee Description   |              |  |               |                       |                           |                       | Fee (\$)       |
| Each claim over 20 (including Reissues)   |              |  |               |                       |                           |                       | 52             |
| Each independent claim over 3 (including Reissues)  |              |  |               |                       |                           |                       | 220            |
| Multiple dependent claims   |              |  |               |                       |                           |                       | 390            |
|   |              |  |               |                       |                           |                       | 195            |
| Total Claims  | Extra Claims | Fee (\$)   | Fee Paid (\$) |                       | Multiple Dependent Claims |                       |                |
| 12  | - 20 or HP   | x  | =             |                       | Fee (\$)                  | Fee Paid (\$)         |                |
| HP = highest number of total claims paid for, if greater than 20.   |              |  |               |                       |                           |                       |                |
| Indep. Claims   | Extra Claims | Fee (\$)   | Fee Paid (\$) |                       |                           |                       |                |
| 3   | - 3 or HP    | x  | =             |                       |                           |                       |                |
| HP = highest number of independent claims paid for, if greater than 3.  |              |  |               |                       |                           |                       |                |
| 3. APPLICATION SIZE FEE   |              |  |               |                       |                           |                       |                |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |              |  |               |                       |                           |                       |                |
| Total Sheets  | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$)      | Fee Paid (\$)         |                           |                       |                |
| - 100 =   | /50 =        | (round up to a whole number) x                   | =             |                       |                           |                       |                |
| 4. OTHER FEES (\$)  |              |  |               |                       |                           |                       |                |
| Non-English Specification, \$130 fee (no small entity discount)   |              |  |               |                       |                           |                       |                |
| Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...   |              |  |               |                       |                           |                       | 810.00         |
| 1251 Extension for response within first month  |              |  |               |                       |                           |                       | 130.00         |

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| SUBMITTED BY                        |                         |                |  |
| Signature                           | Registration No.        | Telephone      |  |
| (Name/Print/Type) James M. Slattery | (Attorney/Agent) 28,380 | (703) 205-8015 |  |
| Date                                | October 23, 2009        |                |  |